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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

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| Application Number | 10/027,087 |
| Filing Date | December 20, 2001 |
| First Named Inventor | Gerald Coffey |
| Art Unit | TBA |
| Examiner Name | TBA |
| Attorney Docket Number | 105125-51427 |

Total Number of Pages in This Submission

3

ENCLOSURES (Check all that apply)

- | | | |
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| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Return Receipt Postcard |
|---|--|---|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|--|
| Firm or Individual name | R. Hain Swope, Esq.; Registration No.: 24,864 Gibbons, Del Deo, Dolan, Griffinger & Vecchione |
| Signature | |
| Date | July 20, 2004 |

CERTIFICATE OF TRANSMISSION/MAILING

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PTO/SB/82 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

| | |
|------------------------|-------------------|
| Application Number | 10/027,087 |
| Filing Date | December 20, 2001 |
| First Named Inventor | Gerald Coffey |
| Art Unit | TBA |
| Examiner Name | TBA |
| Attorney Docket Number | 105125-51427 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

26345

OR

| | | | | | |
|--|--------------------------|-------|--------------|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | GroundScape Technologies | | | | |
| Address | 4595 Van Epps Road | | | | |
| Address | | | | | |
| City | Brooklyn Heights | State | Ohio | Zip | 44131 |
| Country | USA | | | | |
| Telephone | 216-749-7575 | Fax | 216-749-7573 | | |

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|--|-----------|--------------|
| Name | Eric D. Senders, COO, GroundScape Technologies | | |
| Signature | | | |
| Date | 3/22/04 | Telephone | 216-749-7575 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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